

Work Order ID 94209

November-30-12 10:11:24 AM

94209

Page 1

Item ID: D350-607-543

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Heli-Utility-Basket

Start Date: 12/07/12 Start Qty: 1.00

1

Label only

Cust Item ID:

Required Date: 12/21/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: *[Signature]*

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr | Revision Nbr | | | | | | | | |
| D350-607-3 | A | | | | | | | | |
| 100 | | 0.00 | | | | | | | |
| *100* | DOCUMENT CONTROL | | | | | | | | |
| DC | Memo <i>M.H.</i> | 0.00 | | | | | | | |
| Document Control | Photocopy bluefile & type labels per PPPD350-607-543 CHG004 | | | | | | | | |
| 110 | Pick Kit | 0.00 | | | | | | | |
| *110* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | Install placard and label as per dwg ***Mask label plate to size of label, use scotchbrite red pad to lightly sand area for label, apply label *** | | | | | | | | |
| 115 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *115* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | inspect label | | | | | | | | |

per ECN 13-582 MF 13-7-9

[Handwritten mark]

1x

M.H. 13-07-30

13.8.12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | | |

Work Order ID 94209

94209

Page 2

November-30-12 10:11:24 AM

Item ID: D350-607-543

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Heli-Utility-Basket

Start Date: 12/07/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 12/21/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

120 QC4- 100% Inspect kits for completeness 0.00

120

QC

Memo

0.00

Quality Control

130 Pick Kit 0.00

130

Packaging

Memo

0.00

Packaging

Package as per PPPD350-607-543

140 QC21- Final Inspection - Work Order Release 0.00

140

QC

Memo

0.00

Quality Control

DIS 06 13/01

1 Sh 13-08-1011

ML5 13-08-13

ME 13-8-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
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| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Picklist Print

November-30-12 10:11:23 AM

Page 1

Work Order ID: 94209
Parent Item: D350-607-543
Parent Item Name: Heli-Utility-Basket

Start Date: 12/07/12 Required Date: 12/21/12
Start Qty: 1.00 Required Qty: 1.00

Comments: IPP REV:A 10-08-19 AS PER REV.A DD VERF BY:EC IPP REV:B 12.03.06 AS PER
ECN12-535 DD VERF:EC IPP REV:C 12.07.24 AS PER ECN 12-610 DD VERF:EC

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

| | | | | | | | | | | | | | |
|--------------|--|--------------|----|--|--|--|------|--------|---|---------|--|--|--|
| D350-607-511 | | Manufactured | No | | | | Each | 4.0000 | 1 | 100.281 | | | |
|--------------|--|--------------|----|--|--|--|------|--------|---|---------|--|--|--|

Quick Release Basket Mounting Installation

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| PK012 | 4 | |
| 89955 | 1 | |
| 90515 | 1 | |
| 90702 | 1 | |
| 90825 | 1 | |

| | | | | | | | | | | | | | |
|---------|--|--------------|----|--|--|--|------|---------|---|----------------|--|--|--|
| D2690-6 | | Manufactured | No | | | | Each | 30.0000 | 1 | 11.10.13-07-30 | | | |
|---------|--|--------------|----|--|--|--|------|---------|---|----------------|--|--|--|

Lanyard Assembly

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| GA | 3 | |
| 91957 | 3 | |
| ST014 | 27 | |
| 90568 | 2 | |
| 91642 | 1 | |
| 92559 | 4 | |
| 92739 | 6 | |
| 92867 | 4 | |
| 93401 | 10 | |

| | | | | | | | | | | | | | |
|-----------|--|--------------|----|--|--|--|------|--------|---|--------|--|--|--|
| D3912-041 | | Manufactured | No | | | | Each | 3.0000 | 1 | 11.10. | | | |
|-----------|--|--------------|----|--|--|--|------|--------|---|--------|--|--|--|

Eyebolt Receiver Assembly

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| ST072 | 3 | |
| 92631 | 2 | |
| 92798 | 1 | |

| | | | | | | | | | | | | | |
|-----------|--|--------------|----|--|--|--|------|--------|---|--------|--|--|--|
| D4030-043 | | Manufactured | No | | | | Each | 0.0000 | 1 | B94092 | | | |
|-----------|--|--------------|----|--|--|--|------|--------|---|--------|--|--|--|

Long Basket Assembly, Light Lid (350)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
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| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Picklist Print

November-30-12 10:11:23 AM

Page 2

Work Order ID: 94209

Parent Item: D350-607-543

Parent Item Name: Heli-Utility-Basket

Start Date: 12/07/12

Required Date: 12/21/12

Start Qty: 1.00

Required Qty: 1.00

D4085-3
Placard, Instructions

Manufactured No

Each 12.0000

Location

Loc Qty

Loc Code

ST093

1

87037

1

ST095

11

87738

11

B102283

11.12.13-07-30

D4086-215
Placard, Max Load

Manufactured No

Each 12.0000

Location

Loc Qty

Loc Code

ST093

12

87674

2

90185

10

IX

D4151-041
Basket Fwd Hardpoint Assembly, Lower

Manufactured No

Each 8.0000

Location

Loc Qty

Loc Code

ST101

8

89111

5

91839

2

92138

1

B100307

D4151-043
Basket Fwd Hardpoint Assembly, Upper

Manufactured No

Each 9.0000

Location

Loc Qty

Loc Code

ST101

9

89381

8

92741

1

B100552

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Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

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|--------------------------------------------------------------|-------------|-------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|---------------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
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| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | | | | | | |
|-------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|-----------------------------------------------|---------------------------------------------|--|--|--|--|--|
| Landing Gear | | | General | | | | | | |
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain | <input type="checkbox"/> Ovalized | <input type="checkbox"/> Pressure/Forced | | | | | |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware | <input type="checkbox"/> Over/Under tolerance | <input type="checkbox"/> Temperature/Cure | | | | | |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete | <input type="checkbox"/> Part Incorrect | <input type="checkbox"/> Weld | | | | | |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing | <input type="checkbox"/> Wrong Stock Pulled | | | | | |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Part Moved | <input type="checkbox"/> Positioned Wrong | | | | | |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled | <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Other | | | | | |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread | | | | | | | |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset | | | | | | | |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration | | | | | | | |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence | | | | | | | |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions | | | | | | | |

Picklist Print

November-30-12 10:11:23 AM

Page 3

Work Order ID: 94209

Parent Item: D350-607-543

Parent Item Name: Heli-Utility-Basket

Start Date: 12/07/12

Required Date: 12/21/12

Start Qty: 1.00

Required Qty: 1.00

D4150-041
Attachment Arm Assembly

Manufactured No

Each 15.0000

①

M. H. 13-07-30

Location

Loc Qty

Loc Code

| | |
|-------|----|
| ST100 | 15 |
| 89232 | 3 |
| 90848 | 2 |
| 92513 | 1 |
| 92683 | 4 |
| 93281 | 5 |

B100395

AN4-13A

Bolt

Purchased No

Each 669.0000

⑥

M. H.

Location

Loc Qty

Loc Code

| | |
|------------|-----|
| FG | 20 |
| 122808 | 20 |
| GA | 1 |
| 121652 | 1 |
| Return2012 | 8 |
| 122416 | 8 |
| ST356 | 640 |
| 120187 | 19 |
| 120770 | 12 |
| 122063 | 1 |
| 122416 | 10 |
| 122808 | 2 |
| 122993 | 420 |
| 123525 | 176 |

111925

AN4-13A

BOLT

Purchased No

Each 19.0000

①

M. H.

Location

Loc Qty

Loc Code

| | |
|--------|----|
| ST357 | 19 |
| 120124 | 1 |
| 121146 | 1 |
| 122808 | 17 |

126176

November-30-12 10:11:23 AM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
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| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Picklist Print

November-30-12 10:11:23 AM

Page 4

Work Order ID: 94209

Parent Item: D350-607-543

Parent Item Name: Heli-Utility-Basket

Start Date: 12/07/12

Required Date: 12/21/12

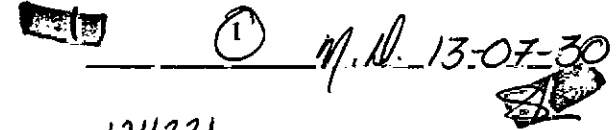
Start Qty: 1.00

Required Qty: 1.00



Purchased No

Each 95.0000



Location

Loc Qty

Loc Code

ST343

95

120360

1

121166

1

122800

13

122993

50

123831

30

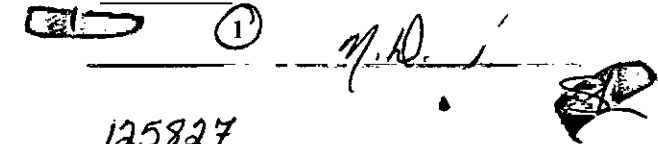
124221

MS17984-C413

PIN, QUICK RELEASE

Purchased No

Each 9.0000



Location

Loc Qty

Loc Code

ST331

9

114340

1

118612

2

123346

6

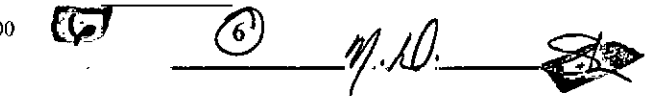
125827

MS21042L4

Nut

Purchased No

Each 4,165.0000



Location

Loc Qty

Loc Code

ST314

4165

119017

20

122452

184

123021

1461

123248

900

123355

1600

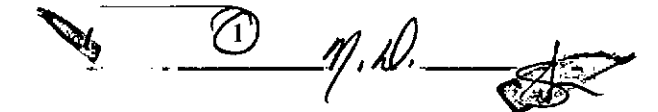
126073

MS24665-151

Cotter Pin

Purchased No

Each 223.0000



Location

Loc Qty

Loc Code

ST323

223

122802

149

17566

74

125646

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Shop Packet Print

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|----------------------------------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | | |
|-------------------------------------------------------|-----------------------------------------|----------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain | <input type="checkbox"/> Ovalized |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware | <input type="checkbox"/> Over/Under tolerance |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete | <input type="checkbox"/> Part Incorrect |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Part Moved |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled | <input type="checkbox"/> Positioned Wrong |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread | <input type="checkbox"/> Power Loss/Surge |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset | <input type="checkbox"/> Pressure/Forced |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration | <input type="checkbox"/> Temperature/Cure |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Weld |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Wrong Stock Pulled |
| | | | <input type="checkbox"/> Other |

Picklist Print

November-30-12 10:11:23 AM

Page 5

Work Order ID: 94209

Parent Item: D350-607-543

Parent Item Name: Heli-Utility-Basket

Start Date: 12/07/12

Required Date: 12/21/12

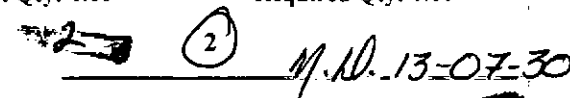
Start Qty: 1.00

Required Qty: 1.00

~~NAS1515H4L~~
WASHER

Purchased No

Each 365.0000



Location

Loc Qty

Loc Code

FG

8

103691

8

ST298

357

118709

2

120390

105

123560

250

125654

Purchased No

Each 186.0000



Location

Loc Qty

Loc Code

ST295

186

121350

15

122151

13

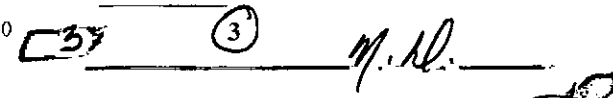
123522

158

125268

Purchased No

Each 1,031.0000



Location

Loc Qty

Loc Code

ST292

1031

115358

1

117735

17

119097

413

123248

400

123355

200

123248

~~NAS1149F0432P~~
Washer

~~NAS1149C0463R~~
Washer

November-30-12 10:11:23 AM

Shop Packet Print

Page 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--------------------------------------------------------------|-------------|-------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|---------------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

4.0 WEIGHT AND BALANCE

| Installation | Weight | LATERAL | | LONGITUDINAL | |
|--------------------------------------------------------|--------------------|-----------------------|-----------------------------|------------------|---------------------------|
| | | Arm | Moment | Arm | Moment |
| D350-607-541 (Standard Basket) | 80.7 lb 36.6 kg | ± 49.1 in ± 1.25 m | ± 3962 in-lb ± 45.8 m-kG | 135 in 3.43 m | 10895 in-lb 125.5 m-kG |
| D350-607-543 (Lightweight Basket) | 65.7 lb 29.8 kg | ± 49.1 in ± 1.25 m | ± 3226 in-lb ± 37.3 m-kG | 135 in 3.43 m | 8870 in-lb 102.2 m-kG |
| D350-607-545 (Standard Basket) | 58.7 lb 26.2 kg | ± 49.1 in ± 1.25m | ± 2882 in-lb ± 32.8 m-kG | 135 in 3.43 m | 7925 in-lb 89.9 m-kG |
| D350-607-547 (Lightweight Basket) | 47.7 lb 21.6 kg | ± 49.1 in ± 1.25 m | ± 2342 in-lb ± 27.0 m-kG | 135 in 3.43 m | 6440 in-lb 74.1 m-kG |
| D350-607-511 (Quick Release Basket Mounting Kit) | 7.2 lb 3.3 kg | ± 36.9 in ± 0.94 m | ± 266 in-lb ± 3.1 m-kG | 135 in 3.43 m | 972 in-lb 11.3 m-kG |

5.0 PARTS LIST

| QTY -541 | QTY -543 | QTY -545 | QTY -547 | QTY -511 | QTY -501 | PART NUMBER | DESCRIPTION |
|-------------|-------------|-------------|-------------|-------------|-------------|---------------|-----------------------------------|
| X | X | | | | | D350-607-541 | HELI-UTILITY-BASKET |
| | | X | | | | D350-607-543 | HELI-UTILITY-BASKET |
| | | | X | | | D350-607-545 | HELI-UTILITY-BASKET |
| 1 | 1 | 1 | 1 | X | | D350-607-547 | HELI-UTILITY-BASKET |
| | | | | | X | D350-607-511 | QUICK RELEASE BASKET MOUNTING KIT |
| | | | | | | D350-607-501 | CONVERSION KIT |
| 1 | 1 | 1 | 1 | | 1 | D2690-6 | LANYARD |
| 1 | 1 | 1 | 1 | 4 | 4 | D3910-3 | X-TUBE LUG |
| | | | | 8 | 8 | D3912-041 | EYEBOLT RECEIVER ASSY |
| 1 | | | | | | D3984-030 | RUBBER EXTRUSION, X-TUBE |
| | | | | | | D4030-041 | LONG BASKET ASSY |
| | | 1 | | | | D4030-043 | LONG BASKET ASSY, LIGHTWEIGHT |
| | | | 1 | | | D4032-041 | SHORT BASKET ASSY |
| 1 | 1 | 1 | 1 | | 1 | D4032-043 | SHORT BASKET ASSY, LIGHTWEIGHT |
| 1 | | | | | 1 | D4085-3 | PLACARD-INSTRUCTIONS |
| | | | | | 1 | D4086-200 | PLACARD, MAX LOAD |
| | | 1 | | | 1 | D4086-215 | PLACARD, MAX LOAD |
| | | | 1 | | 1 | D4086-220 | PLACARD, MAX LOAD |
| | | | | 1 | 1 | D4086-232 | PLACARD, MAX LOAD |
| | | | | 1 | 1 | D4148-041 | FWD X-TUBE LUG ASSY |
| 1 | 1 | 1 | 1 | | 1 | D4149-041 | AFT X-TUBE LUG ASSY |
| 1 | 1 | 1 | 1 | | 1 | D4150-041 | ATTACHMENT ARM ASSY |
| 1 | 1 | 1 | 1 | | 1 | D4151-041 | BASKET FWD HARDPOINT ASSY (LOWER) |
| | | | | | 1 | D4151-043 | BASKET FWD HARDPOINT ASSY (UPPER) |
| 6 | 6 | 6 | 6 | | 6 | AN4-13A | BOLT |
| 1 | 1 | 1 | 1 | 16 | 16 | AN4-14A | BOLT |
| 1 | 1 | 1 | 1 | | 1 | AN4C15 | BOLT |
| 1 | 1 | 1 | 1 | | 1 | AN310C4 | CASTELLATED NUT |
| 6 | 6 | 8 | 6 | 16 | 22 | MS17984-C413 | QUICK RELEASE PIN |
| 1 | 1 | 1 | 1 | | 1 | MS21042L4 | NUT (OR MS21042-4) |
| 2 | 2 | 2 | 2 | | 2 | MS24665-151 | COTTER PIN |
| 12 | 12 | 12 | 12 | 32 | 44 | NAS1515H4L | WASHER |
| 3 | 3 | 3 | 3 | | 3 | NAS1149F0432P | WASHER |
| | | | | | | NAS1449C0463R | WASHER |

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Revision: A
Date: 10.06.28

Work Order ID 94209

November-30-12 10:11:24 AM

94209

Page 1

Item ID: D350-607-543

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Heli-Utility-Basket

Start Date: 12/07/12 Start Qty: 1.00

1

Label only

Cust Item ID:

Required Date: 12/21/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: *[Signature]*

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr | Revision Nbr | | | | | | | | |
| D350-607-3 | A | | | | | | | | |
| 100 | | 0.00 | | | | | | | |
| *100* | DOCUMENT CONTROL | | | | | | | | |
| DC | Memo <i>M.L.</i> | 0.00 | | | | | | | |
| Document Control | Photocopy bluefile & type labels per PPPD350-607-543 CHG004 | | | | | | | | |
| 110 | | 0.00 | | | | | | | |
| *110* | Pick Kit | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | Install placard and label as per dwg ***Mask label plate to size of label, use scotchbrite red pad to lightly sand area for label, apply label *** | | | | | | | | |
| 115 | | 0.00 | | | | | | | |
| *115* | QCS- Inspect part completeness to step on W/O | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | inspect label | | | | | | | | |

M.L. 13-07-30

*PER ELN.
13-582
MF
13-7-9*

IX M.L. 13-07-30

